Fill in this information to identify the case.	ed 09/05/19 12:06:25 Desc Main 3
Debtor 1 Taryn L. Parsons	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Southern	of Ohio (State)

Form 4100R

Response to Notice of Final Cure Payment

10/15

Part 1: Mortgage	Information								
Name of creditor:	U.S. Bank Trust National Association, as 1			Truste	e of th	ne SC	CIG	Court claim no. (if known):	
	Series III Trust			 8	1	3	5	<u>13-1</u>	
_ast 4 digits of any	digits of any number you use to identify the debtor's account					<u>5</u>	•		
Property address:	3460 Jessup Roa	ad							
	Number Street			_					
	Cincinnati	ОН	45239	=					
	City	State	ZIP Code	_					
-					,.				
Creditor agrees th	nat the debtor(s) have	naid in full the :	amount requi	red to cu	re the	nrene	tition d	efault	
on the creditor's o		•	,						
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Debtor 1	Taryn L. I	Parsons		Case number (if known) 1:15-bk-14312
	First Name	Middle Name	Last Name	

Part 4: **Itemized Payment History**

If the creditor disagrees in Part 2 that the prepetition arrearage has been paid in full or states in Part 3 that the debtor(s) are not current with all postpetition payments, including all fees, charges, expenses, escrow, and costs, the creditor must attach an itemized payment history disclosing the following amounts from the date of the bankruptcy filing through the date of this response:

- all payments received;
- all fees, costs, escrow, and expenses assessed to the mortgage; and
- all amounts the creditor contends remain unpaid.

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The person completing this response must sign it.	The response must be filed as a supplement to the creditor's
proof of claim.	

Check the appropriate box::

- ☐ I am the creditor.
- I am the creditor's authorized agent.

I declare under penalty of perjury that the information provided in this response is true and correct to the best of my knowledge, information, and reasonable belief.

Sign and print your name and your title, if any, and state your address and telephone number if different from the notice address listed on the proof of claim to which this response applies.

/s/ Molly Slutsky Simons			Date	09,05,2019	
Signature					
Molly Slutsk	ky Simons		Title	Attorney for Creditor	
First Name	Middle Name	Last Name			
Sottile and B	arile, Attorneys at	Law			

If different from the notice address listed on the proof of claim to which this response applies:

394 Wards Corner Road, Suite 180 Number Loveland OH 45140 ZIP Code City State Email_bankruptcy@sottileandbarile.com ₍₅₁₃₎ 444 _ 4100 Contact phone

Print

Company

Address

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO CINCINNATI DIVISION

In Re: Case No. 1:15-bk-14312

Taryn L. Parsons Chapter 13

Debtor. Judge Jeffery P. Hopkins

CERTIFICATE OF SERVICE

I certify that a copy of the foregoing Response to Notice of Final Cure Payment was served **electronically** on September 5, 2019 through the Court's ECF System on all ECF participants registered in this case at the e-mail address registered with the Court

And by **ordinary U.S. Mail** on September 5, 2019 addressed to:

Taryn L. Parsons, Debtor 3460 Jessup Road Cincinnati, OH 45239

Respectfully Submitted,

/s/ Molly Slutsky Simons

Molly Slutsky Simons (0083702) Sottile & Barile, Attorneys at Law 394 Wards Corner Road, Suite 180

Loveland, OH 45140 Phone: 513.444.4100

Email: bankruptcy@sottileandbarile.com

Attorney for Creditor